DebtEd

# U.S. Bankruptcy Court Northern District of California (Oakland) Bankruptcy Petition #: 09-70509

Date filed: 11/03/2009

Assigned to: Judge Leslie J. Tchaikovsky

Chapter 13 Voluntary Asset

Debtor

**OSO Cold Records** 

1853 9th Ave. #1, #2,#3 n/c #1 Oakland, CA 94606 Tax ID / EIN: 0

dba

Sub-Tenant 394717 a/a 38883

aka

3109 King St Property Mgmt/ Promugatoress

394717

Joint Debtor

Kamaal Romon Goyens, Sr.

1853 9th Ave. #1 Oakland, CA 94606 SSN / ITIN: xxx-xx-6021

Trustee

Martha G. Bronitsky

P.O. Box 5004

Hayward, CA 94540-5004

510-266-5580

U.S. Trustee

Office of the U.S. Trustee/Oak

Office of the U.S. Trustee 1301 Clay St. #690N Oakland, CA 94612 (510) 637-3200

represented by OSO Cold Records

PRO SE

represented by Kamaal Romon Goyens, Sr.

PRO SE

I hereby certify that the foregoing/annexed instrument is a true and correct copy of the original on file in the Northern District of Calif.

Dated:

Gioria L. Franklin, Clerk

U.S. Bankruptcy Court

11/6/2009

Deputy Cont

Filing Date

#

**Docket Text** 

,		
11/03/2009	<b>₽</b> <u>1</u>	Chapter 13 Voluntary Petition, Fee Amount \$80.00. Filed by OSO Cold Records, Kamaal Romon Goyens Sr Section 521 Filings due by 12/18/2009. Order Meeting of Creditors due by 12/3/2009. Chapter 13 Plan due by 11/18/2009. (tp) COURT ENTRY: NO PAYMENT FOR RENT WITH PETITION (AS INDICATED ON PAGE 2 OF PETITION). Modified on 11/4/2009 (tp). (Entered: 11/03/2009)
11/03/2009	<b>3</b> 2	Statement of Social Security Number. Filed by Joint Debtor Kamaal Romon Goyens Sr. (tp) (Entered: 11/03/2009)
11/03/2009	<b>3</b>	Chapter 13 Plan Filed by Joint Debtor Kamaal Romon Goyens Sr., Debtor OSO Cold Records (RE: related document(s) 1 Voluntary Petition (Chapter 13) filed by Debtor OSO Cold Records, Joint Debtor Kamaal Romon Goyens). (tp) (Entered: 11/03/2009)
11/03/2009	<b>3</b> 4	Application to Pay Filing Fee in Installments Filed by Joint Debtor Kamaal Romon Goyens Sr., Debtor OSO Cold Records (tp) (Entered: 11/03/2009)
11/03/2009	<b>ॐ</b> <u>5</u>	Certification of Domestic Support Obligation Payees are Current at this Time. Filed by Joint Debtor Kamaal Romon Goyens Sr., Debtor OSO Cold Records (tp) (Entered: 11/03/2009)
11/03/2009	• <u>6</u>	Debtor's Certification in Support of Discharge. Filed by Joint Debtor Kamaal Romon Goyens Sr., Debtor OSO Cold Records (tp) Modified on 11/5/2009 NO NOTICE GENERATED. (pw). (Entered: 11/03/2009)
11/03/2009	<b>ॐ</b> <u>7</u>	Application For Order Waiving Requirement for Business Evaluation; Declaration of Debtor(s). Filed by Joint Debtor Kamaal Romon Goyens Sr., Debtor OSO Cold Records (tp) (Entered: 11/03/2009)
11/03/2009	<b>G</b>	Receipt of Installment Filing Fee for Chapter 13 Voluntary Petition. Amount 80.00 from Kamaal Goyens. Receipt Number 50071935. (admin) (Entered: 11/03/2009)
11/03/2009	•	Receipt of Installment Filing Fee for Chapter 13 Voluntary Petition. Amount 50.00 from Kamaal Goyens Sr Receipt Number 50071936. (admin) (Entered: 11/03/2009)
11/06/2009	<b>3</b> 8	Notice of Certified Copy of Docket Report (trw) Modified on 11/6/2009 PLEASE DISREGARD. REFER TO DOCUMENT #9 (trw). (Entered: 11/06/2009)
11/06/2009	<b>9</b> 9	Corrected Notice of Certified Copy of Docket Report (trw) (Entered: 11/06/2009)

U8-1355-IIIQ Duc 8245-5 Filed 04/07/10 Entered 04/12/10 17:	24:44 Attachment 6
United States Bankruptcy Court Southern 3 struct No.	PROOF OF CLAIM
Name of Debtor: ANTHONY MAZUROWSKI Lehman Bookhers to Caling alice NOTE: This form should not be used to make a claim for mathematical the standard of the sta	Case Number: 3555
NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement of administrative expense may be filed pursuant to 11°C.S.C. § 503.	of the case. A request for payment of an
Name of Creditor (the person or other entity to whom the debtor owes money or property):  INDY MAC division of One West  Name and address where notices should be sent:	☐ Check this box to indicate that this claim amends a previously filed
Anthony Hazurowski	claim.
117 Montgomery Road Sebastopol, CA 95472	Court Claim Number: (If known)
Telephone number:	]
(707) 824-0436	Filed on:
Name and address where payment should be sent (if different from above):  SAME	Check this box if you are aware that anyone else has filed a proof of claim
The land to the state of the st	relating to your claim. Attach copy of statement giving particulars.
Telephone number:	☐ Check this box if you are the debtor
1. Amount of Claim as of Date Case Filed:	or trustee in this case.  5. Amount of Claim Entitled to
If all or part of your claim is secured, complete item 4 below; however, if all of your claim is unsecured, do not complete item 4.	Priority under 11 U.S.C. §507(a). If any portion of your claim falls in one of the following categories,
If all or part of your claim is entitled to priority, complete item 5.	check the box and state the amount.
☐ Check this box if claim includes interest or other charges in addition to the principal amount of claim. Attach itemized statement of interest or charges.	Specify the priority of the claim.
2. Basis for Claim: MORTGAGE NOTE	☐ Domestic support obligations under
(See instruction #2 on reverse side.)	11 U.S.C. §507(a)(1)(A) or (a)(1)(B).
3. Last four digits of any number by which creditor identifies debtor:	☐ Wages, salaries, or commissions (up to \$11,725*) earned within 180 days
3a. Debtor may have scheduled account as:  (See instruction #3a on reverse side.)	before filing of the bankruptcy petition or cessation of the debtor's
4. Secured Claim (See instruction #4 on reverse side.) Check the appropriate box if your claim is secured by a lien on property or a right of setoff and provide the requested information.	business, whichever is earlier – 11 U.S.C. §507 (a)(4).
Nature of property or right of setoff:   Real Estate   Motor Vehicle   Other	☐ Contributions to an employee benefit plan – 11 U.S.C. §507 (a)(5).
Value of Property:\$ Annual Interest Rate%	☐ Up to \$2,600* of deposits toward purchase, lease, or rental of property
Amount of arrearage and other charges as of time case filed included in secured claim,	or services for personal, family, or household use – 11 U.S.C. §507 (a)(7).
if any: \$Basis for perfection:	
Amount of Secured Claim: S Amount Unsecured: \$	☐ Taxes or penalties owed to governmental units – 11 U.S.C. §507 (a)(8).
6. Credits: The amount of all payments on this claim has been credited for the purpose of making this proof of claim.  7. Decuments: Attack reducted conics of making this proof of claim.	☐ Other Specify applicable paragraph of 11 U.S.C. §507 (a)().
7. Documents: Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. You may also attach a summary. Attach redacted copies of documents providing evidence of perfection of	Amount entitled to priority:
a security interest. You may also attach a summary. (See instruction 7 and definition of "redacted" on reverse side.)	\$
DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.	*Amounts are subject to adjustment on
If the documents are not available, please explain:	4/1/13 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.
Date: Signature: The person filing this claim must sign it. Sign and print and a sign is	FOR COURT USE ONLY
Signature: The person filing this claim must sign it. Sign and print name and title, if any, of the creother person authorized to file this claim and state address and telephone number if different from the address above. Attach copy of power of attorney, if any.	editor or e notice
Caplant Whith to	
Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both.	18 U.S.C. §§ 152 and 3571.

B 10 (Official Form 10) (04/10)

B 10 (Official Form 10) (04/10) - Cont.

U8-13555-ING DOC 8245-5 INSTRUCTIONS FOR PROOF OF CLAIM FORM

The instructions and definitions below are general explanations of the law. In Gertain circumstances, such as bankruptcy cases not filed voluntarily by the debtor, there may be exceptions to these general rules.

#### Items to be completed in Proof of Claim form

# Court, Name of Debtor, and Case Number:

Fill in the federal judicial district where the bankruptcy case was filed (for example, Central District of California), the bankruptcy debtor's name, and the bankruptcy case number. If the creditor received a notice of the case from the bankruptcy court, all of this information is located at the top of the notice.

#### Creditor's Name and Address:

Fill in the name of the person or entity asserting a claim and the name and address of the person who should receive notices issued during the bankruptcy case. A separate space is provided for the payment address if it differs from the notice address. The creditor has a continuing obligation to keep the court informed of its current address. See Federal Rule of Bankruptcy Procedure (FRBP) 2002(g).

### 1. Amount of Claim as of Date Case Filed:

State the total amount owed to the creditor on the date of the Bankruptcy filing. Follow the instructions concerning whether to complete items 4 and 5. Check the box if interest or other charges are included in the claim.

#### 2. Basis for Claim:

State the type of debt or how it was incurred. Examples include goods sold, money loaned, services performed, personal injury/wrongful death, car loan, mortgage note, and credit card. If the claim is based on the delivery of health care goods or services, limit the disclosure of the goods or services so as to avoid embarrassment or the disclosure of confidential health care information. You may be required to provide additional disclosure if the trustee or another party in interest files an objection to your claim.

#### Last Four Digits of Any Number by Which Creditor Identifies Debtor:

State only the last four digits of the debtor's account or other number used by the creditor to identify the debtor.

# 3a. Debtor May Have Scheduled Account As:

Use this space to report a change in the creditor's name, a transferred claim, or any other information that clarifies a difference between this proof of claim and the claim as scheduled by the debtor.

#### 4. Secured Claim;

Check the appropriate box and provide the requested information if the claim is fully or partially secured. Skip this section if the claim is entirely unsecured. (See DEFINITIONS, below.) State the type and the value of property that secures the claim, attach copies of lien documentation, and state annual interest rate and the amount past due on the claim as of the date of the bankruptcy filing.

5. Amount of Claim Entitled to Priority Under 11 U.S.C. §507(a). If any portion of your claim falls in one or more of the listed categories, check the appropriate box(es) and state the amount entitled to priority. (See DEFINITIONS, below.) A claim may be partly priority and partly non-priority. For example, in some of the categories, the law limits the amount entitled to priority.

#### 6. Credits:

An authorized signature on this proof of claim serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

#### 7. Documents:

Attach to this proof of claim form redacted copies documenting the existence of the debt and of any lien securing the debt. You may also attach a summary. You must also attach copies of documents that evidence perfection of any security interest. You may also attach a summary. FRBP 3001(c) and (d). If the claim is based on the delivery of health care goods or services, see instruction 2. Do not send original documents, as attachments may be destroyed after scanning.

#### Date and Signature:

The person filing this proof of claim must sign and date it. FRBP 9011. If the claim is filed electronically, FRBP 5005(a)(2), authorizes courts to establish local rules specifying what constitutes a signature. Print the name and title, if any, of the creditor or other person authorized to file this claim. State the filer's address and telephone number if it differs from the address given on the top of the form for purposes of receiving notices. Attach a complete copy of any power of attorney. Criminal penalties apply for making a false statement on a proof of claim.

#### DEFINITIONS

A debtor is the person, corporation, or other entity that has filed a bankruptcy case.

A creditor is a person, corporation, or other entity owed a debt by the debtor that arose on or before the date of the bankruptcy filing. See 11 U.S.C. §101 (10)

A claim is the creditor's right to receive payment on a debt owed by the debtor that arose on the date of the bankruptcy filing. See 11 U.S.C. §101 (5). A claim may be secured or unsecured.

#### **Proof of Claim**

A proof of claim is a form used by the creditor to indicate the amount of the debt owed by the debtor on the date of the bankruptcy filing. The creditor must file the form with the clerk of the same bankruptcy court in which the bankruptcy case was filed.

#### Secured Claim Under 11 U.S.C. §506(a)

A secured claim is one backed by a lien on property of the debtor. The claim is secured so long as the creditor has the right to be paid from the property prior to other creditors. The amount of the secured claim cannot exceed the value of the property. Any amount owed to the creditor in excess of the value of the property is an unsecured claim. Examples of liens on property include a mortgage on real estate or a security interest in a car.

A lien may be voluntarily granted by a debtor or may be obtained through a court proceeding. In some states, a court judgment is a lien. A claim also may be secured if the creditor owes the debtor money (has a right to setoff).

#### **Unsecured Claim**

An unsecured claim is one that does not meet the requirements of a secured claim. A claim may be partly unsecured if the amount of the claim exceeds the value of the property on which the creditor has a lien.

Claim Entitled to Priority Under 11 U.S.C. §507(a) Priority claims are certain categories of unsecured claims that are paid from the available money or property in a bankruptcy case before other unsecured claims.

A document has been redacted when the person filing it has masked, edited out, or otherwise deleted, certain information. A creditor should redact and use only the last four digits of any social-security, individual's taxidentification, or financial-account number, all but the initials of a minor's name and only the year of any person's date of birth,

#### Evidence of Perfection

Evidence of perfection may include a mortgage, lien, certificate of title, financing statement, or other document showing that the lien has been filed or recorded.

#### INFORMATION

## Acknowledgment of Filing of Claim

To receive acknowledgment of your filing, you may either enclose a stamped self-addressed envelope and a copy of this proof of claim or you may access the court's PACER system (www.pacer.psc.uscourts.gov) for a small fee to view your filed proof of claim.

### Offers to Purchase a Claim

Certain entities are in the business of purchasing claims for an amount less than the face value of the claims. One or more of these entities may contact the creditor and offer to purchase the claim. Some of the written communications from these entities may easily be confused with official court documentation or communications from the debtor. These entities do not represent the bankruptcy court or the debtor. The creditor has no obligation to sell its claim. However, if the creditor decides to sell its claim, any transfer of such claim is subject to FRBP 3001(e), any applicable provisions of the Bankruptcy Code (11 U.S.C. § 101 et seq.), and any applicable orders of the bankruptcy court.

B 10 (Official Form 10) (04/10)	24.44	Attachment 6
United States Bankruptcy Court Southern Destret Moud		PROOF OF CLAIM
Name of Debtor: ANTHONY MAZUROWSKI Cerman By Hours Folling almo	Case Num	ber: -13555
NOTE: This form should not be used to make a claim for an administrative expense arising lifter the commencement administrative expense may be filed pursuant to 11 U.S.C. § 503.	of the case. A	request for payment of an
Name of Creditor (the person or other entity to whom the debtor owes money or property):  INDY MAC division of One West  Name and address where notices should be sent:		his box to indicate that this nends a previously filed
Anthony Mazurowski 117 Montgomery Road Sebastopol, CA 95472	claim.  Court Cla  (If know.	im Number:
Telephone number: (707) 824-0436	Filed on:_	f felds
Name and address where payment should be sent (if different from above):  SAME	anyone relating	his box if you are aware that else has filed a proof of claim to your claim. Attach copy of at giving particulars.
Telephone number: SAME		nis box if you are the debtor
1. Amount of Claim as of Date Case Filed:	5. Amoun	of Claim Entitled to
If all or part of your claim is secured, complete item 4 below; however, if all of your claim is unsecured, do not complete item 4.	any por one of t	under 11 U.S.C. §507(a). If tion of your claim falls in he following categories,
If all or part of your claim is entitled to priority, complete item 5.	amount	e box and state the
☐ Check this box if claim includes interest or other charges in addition to the principal amount of claim. Attach itemized statement of interest or charges.	l	priority of the claim.
2. Basis for Claim: MORTGAGE NOTE (See instruction #2 on reverse side.)	Domesti 11 U.S.C	c support obligations under 2. §507(a)(1)(A) or (a)(1)(B).
3. Last four digits of any number by which creditor identifies debtor:	□ Wages, s	alaries, or commissions (up
3a. Debtor may have scheduled account as:  (See instruction #3a on reverse side.)	before fi petition	25*) earned within 180 days iling of the bankruptcy or cessation of the debtor's
4. Secured Claim (See instruction #4 on reverse side.) Check the appropriate box if your claim is secured by a lien on property or a right of setoff and provide the requested information.	U.S.C. §	, whichever is earlier – 11 507 (a)(4).
Nature of property or right of setoff:   Real Estate   Motor Vehicle   Other   Describe:	plan – 11	tions to an employee benefit U.S.C. §507 (a)(5).
Value of Property: \$\text{\text{Annual Interest Rate}} \text{\text{\text{\text{Annual Interest Rate}}} \text{\text{\text{\text{\text{\text{\text{Annual Interest Rate}}}} \text{\tin\text{	purchase or service	600* of deposits toward , lease, or rental of property es for personal, family, or
Amount of arrearage and other charges as of time case filed included in secured claim,  if any: \$	househol (a)(7).	d use 11 U.S.C. §507
Amount of Secured Claim: \$ Amount Unsecured: \$		penalties owed to ental units – 11 U.S.C. §507
6. Credits: The amount of all payments on this claim has been credited for the purpose of making this proof of claim.	☐ Other – S	pecify applicable paragraph
7. Documents: Attach redacted copies of any documents that support the claim, such as promissory notes, putchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. You may also attach a summary. Attach redacted copies of documents providing evidence of perfection of		S.C. §507 (a)().  nt entitled to priority:
a security interest. You may also attach a summary. (See instruction 7 and definition of "redacted" on reverse side.)	\$_	
DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.	4/1/13 and e	e subject to adjustment on very 3 years thereafter with
If the documents are not available, please explain:	respect to ca the date of a	ses commenced on or after djustment.
Date: The person filing this claim must sign it. Sign and print name and title, if any, of the cruother person authorized to file this claim and state address and telephone number if different from the address above. Attach copy of power of attorney, if any.	editor or e notice	FOR COURT USE ONLY
ant hungaden eur		
Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both.	18 U.S.C. §§	152 and 3571.

B 10 (Official Form 10) (04/10) ~ Cont. Of 13335 mg Boc 8245 5 Filed 94/97/19 Entered 94/12/10 17:24:44 Attachment 6

INSTRUCTIONS FOR PROPEOF CLAIM FORM

The instructions and definitions below are general explanations of the law. In certain circumstances, such as bankruptcy cases not filed voluntarily by the debtor, there may be exceptions to these general rules.

### Items to be completed in Proof of Claim form

Court, Name of Debtor, and Case Number:

Fill in the federal judicial district where the bankruptcy case was filed (for example, Central District of California), the bankruptcy debtor's name, and the bankruptcy case number. If the creditor received a notice of the case from the bankruptcy court, all of this information is located at the top of the notice.

#### Creditor's Name and Address:

Fill in the name of the person or entity asserting a claim and the name and address of the person who should receive notices issued during the bankruptcy case. A separate space is provided for the payment address if it differs from the notice address. The creditor has a continuing obligation to keep the court informed of its current address. See Federal Rule of Bankruptcy Procedure (FRBP) 2002(g).

# 1. Amount of Claim as of Date Case Filed:

State the total amount owed to the creditor on the date of the Bankruptcy filing. Follow the instructions concerning whether to complete items 4 and 5. Check the box if interest or other charges are included in the claim.

#### 2. Basis for Claim:

State the type of debt or how it was incurred. Examples include goods sold, money loaned, services performed, personal injury/wrongful death, car loan, mortgage note, and credit card. If the claim is based on the delivery of health care goods or services, limit the disclosure of the goods or services so as to avoid embarrassment or the disclosure of confidential health care information. You may be required to provide additional disclosure if the trustee or another party in interest files an objection to your claim.

# 3. Last Four Digits of Any Number by Which Creditor Identifies Debtor:

State only the last four digits of the debtor's account or other number used by the creditor to identify the debtor.

#### 3a. Debtor May Have Scheduled Account As:

Use this space to report a change in the creditor's name, a transferred claim, or any other information that clarifies a difference between this proof of claim and the claim as scheduled by the debtor.

#### 4. Secured Claim:

Check the appropriate box and provide the requested information if the claim is fully or partially secured. Skip this section if the claim is entirely unsecured. (See DEFINITIONS, below.) State the type and the value of property that secures the claim, attach copies of lien documentation, and state annual interest rate and the amount past due on the claim as of the date of the bankruptcy filing.

5. Amount of Claim Entitled to Priority Under 11 U.S.C. §507(a). If any portion of your claim falls in one or more of the listed categories, check the appropriate box(es) and state the amount entitled to priority. (See DEFINITIONS, below.) A claim may be partly priority and partly non-priority. For example, in some of the categories, the law limits the amount entitled to priority.

#### 6. Credits:

An authorized signature on this proof of claim serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

#### 7. Documents:

Attach to this proof of claim form redacted copies documenting the existence of the debt and of any lien securing the debt. You may also attach a summary. You must also attach copies of documents that evidence perfection of any security interest. You may also attach a summary. FRBP 3001(c) and (d). If the claim is based on the delivery of health care goods or services, see instruction 2. Do not send original documents, as attachments may be destroyed after scanning.

#### Date and Signature:

The person filing this proof of claim must sign and date it. FRBP 9011. If the claim is filed electronically, FRBP 5005(a)(2), authorizes courts to establish local rules specifying what constitutes a signature. Print the name and title, if any, of the creditor or other person authorized to file this claim. State the filer's address and telephone number if it differs from the address given on the top of the form for purposes of receiving notices. Attach a complete copy of any power of attorney. Criminal penalties apply for making a false statement on a proof of claim.

#### DEFINITIONS

#### Debtor

A debtor is the person, corporation, or other entity that has filed a bankruptcy case.

#### Creditor

A creditor is a person, corporation, or other entity owed a debt by the debtor that arose on or before the date of the bankruptcy filing. See 11 U.S.C. §101 (10)

#### Claim

A claim is the creditor's right to receive payment on a debt owed by the debtor that arose on the date of the bankruptcy filing. See 11 U.S.C. §101 (5). A claim may be secured or unsecured.

#### **Proof of Claim**

A proof of claim is a form used by the creditor to indicate the amount of the debt owed by the debtor on the date of the bankruptcy filing. The creditor must file the form with the clerk of the same bankruptcy court in which the bankruptcy case was filed.

#### Secured Claim Under 11 U.S.C. §506(a)

A secured claim is one backed by a lien on property of the debtor. The claim is secured so long as the creditor has the right to be paid from the property prior to other creditors. The amount of the secured claim cannot exceed the value of the property. Any amount owed to the creditor in excess of the value of the property is an unsecured claim. Examples of liens on property include a mortgage on real estate or a security interest in a car.

A lien may be voluntarily granted by a debtor or may be obtained through a court proceeding. In some states, a court judgment is a lien. A claim also may be secured if the creditor owes the debtor money (has a right to setoff).

#### Unsecured Claim

An unsecured claim is one that does not meet the requirements of a secured claim. A claim may be partly unsecured if the amount of the claim exceeds the value of the property on which the creditor has a lien.

#### Claim Entitled to Priority Under 11 U.S.C. §507(a) Priority claims are certain categories of unsecured claims

Priority claims are certain categories of unsecured claim that are paid from the available money or property in a bankruptcy case before other unsecured claims.

#### Redacted

A document has been redacted when the person filing it has masked, edited out, or otherwise deleted, certain information. A creditor should redact and use only the last four digits of any social-security, individual's taxidentification, or financial-account number, all but the initials of a minor's name and only the year of any person's date of birth.

#### **Evidence of Perfection**

Evidence of perfection may include a mortgage, lien, certificate of title, financing statement, or other document showing that the lien has been filed or recorded.

#### INFORMATION

## Acknowledgment of Filing of Claim

To receive acknowledgment of your filing, you may either enclose a stamped self-addressed envelope and a copy of this proof of claim or you may access the court's PACER system (www.pacer.psc.uscourts.gov) for a small fee to view your filed proof of claim.

#### Offers to Purchase a Claim

Certain entities are in the business of purchasing claims for an amount less than the face value of the claims. One or more of these entities may contact the creditor and offer to purchase the claim. Some of the written communications from these entities may easily be confused with official court documentation or communications from the debtor. These entities do not represent the bankruptcy court or the debtor. The creditor has no obligation to sell its claim. However, if the creditor decides to sell its claim, any transfer of such claim is subject to FRBP 3001(e), any applicable provisions of the Bankruptcy Code (11 U.S.C. § 101 et seq.), and any applicable orders of the bankruptcy court.

UNITED STATES BANKRUPTCY COURT Management of California	PROOF OF CLAIM
Name of Debtor: Recommendation of Debtor: Re	Case Number:
NOTE: This form should not be used to make a claim for an administrative expense arising after the commen administrative expense may be filed pursuant to 11 U.S.C. § 50,	icement of the case. A request for payment of an
Name of Creditor (the person or other entity to whom the debtor owes money or property): PG&E Acct	☐Check this box to indicate that this claim amends a previously filed claim.
Name and address where notices should be sent: PG&E Acct 3109 King St#A 1900 Harrison St Oakland, Ca 94612	Court Claim Number:(If known)
T-leak-rough -	Fited on:
Telephone number:  Name and address where payment should be sent (if different from above): / , , , , , , , , , , , , , , , , , ,	
Lehman Bretter Holding Sun	Check this box if you are aware that anyous else has filed a proof of claim relating to claim. Attach copy of statement giving particulars.
Telephone number:	Check this box if you are the debtor or to in this case.
1. Amount of Claim as of Date Case Filed: \$	5. Amount of Claim Entitled to Priority u
If all or part of your claim is secured, complete item 4 below; however, if all of your claim is unsecured, do not complete item 4.	11 U.S.C. §507(a). If any portion of yor claim falls in one of the following categ check the box and state the amount.
If all or part of your claim is entitled to priority, complete item 5.	Specify the priority of the claim.
□Check this box if claim includes interest or other charges in addition to the principal amount of claim. Attach itemized statement of interest or charges.	Domestic support obligations under 11
2. Basis for Claim:	U.S.C. §507(a)(1)(A) or (a)(1)(B).
(See instruction #2 on reverse side.)	☐Wages, salaries, or commissions (up to
3. Last four digits of any number by which creditor identifies debtor:  3a. Debtor may have scheduled account as:  (See instruction #3a on reverse side.)	\$10,950*) earned within 180 days before filling of the bankruptcy petition or cessat of the debtor's business, whichever is ear - 11 U.S.C. \$507 (a)(4).
4. Secured Claim (See instruction #4 on reverse side.)  Check the appropriate box if your claim is secured by a lien on property or a right of setoff and provide the requested information.	Contributions to an employee benefit pla U.S.C. §507 (a)(5).
Nature of property or right of setoff: Real Estate Motor Vehicle Other Describe:	Up to \$2,425* of deposits toward purchas lease, or rental of property or services for personal, family, or household use - 11 U \$507 (a)(7).
Value of Property: \$ Annual Interest Rate%  Amount of arrearage and other charges as of time case filed included in secured claim,	☐Taxes or penalties owed to governmental
if any: \$Basis for perfection:	- 11 U.S.C. §507 (a)(8).  Other - Specify applicable paragraph of 1
Amount of Secured Claim: \$ Amount Unsecured: \$	U.S.C. §507 (a)().
6. Credits: The amount of all payments on this claim has been credited for the purpose of making this proof of claim	Amount entitled to priority:
7. Documents: Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. You may also attach a summary. Attach redacted copies of documents providing evidence of perfection of a security interest. You may also attach a summary. (See instruction 7 and definition of "redacted" on reverse side.)	\$
DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.	*Amounts are subject to adjustment on 4/1/ and every 3 years thereafter with respect to cases commenced on or after the date of
	adjustment,

Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.

UNITED STATES BANKRUPTCY COURT District of	PROOF OF CLAIR
Name of Debtor: Research Bothers Holdings  NOTE: This form should not be used to make a claim for an administrative expense arising after the confinence	Case Number:  08-0353  ement of the case. A request for payment of a
administrative expense may be filed pursuant to 11 U.S.C. § 503.	
Name of Creditor (the person or other entity to whom the debtor owes money or property):	Check this box to indicate that this clai amends a previously filed claim.
PG&E Acct	allientes a previously ince cracia
Name and address where notices should be sent: PG&E Acct	Court Claim Number:
3109 King St #D 1900 Harrison St	(If known)
Oakland, Ca 94612	
	Filed on:
Telephone number:	
Name and address where payment should be sent (if different from above):  When the should be sent (if different from above):  When the should be sent (if different from above):	Check this box if you are aware that an else has filed a proof of claim relating t claim. Attach copy of statement giving particulars.
Telephone number:	Check this box if you are the debtor or in this case.
1. Amount of Claim as of Date Case Filed:	5. Amount of Claim Entitled to Priority
If all or part of your claim is secured, complete item 4 below; however, if all of your claim is unsecured, do not complete item 4.	11 U.S.C. §507(a). If any portion of y claim falls in one of the following cat check the box and state the amount.
If all or part of your claim is entitled to priority, complete item 5.	Sandfu the admits of the eleien
Check this box if claim includes interest or other charges in addition to the principal amount of claim. Attach	Specify the priority of the claim.
itemized statement of interest or charges.	Domestic support obligations under 11 U.S.C. §507(a)(1)(A) or (a)(1)(B).
2. Basis for Claim: (See instruction #2 on reverse side.)	☐ Wages, salaries, or commissions (up to
3. Last four digits of any number by which creditor identifies debtor:	\$10,950*) earned within 180 days befo
	filing of the bankruptcy petition or cess of the debtor's business, whichever is e
3a. Debtor may have scheduled account as: (See instruction #3a on reverse side.)	- 11 U.S.C. §507 (a)(4).
4. Secured Claim (See instruction #4 on reverse side.)  Check the appropriate box if your claim is secured by a lien on property or a right of setoff and provide the requested information.	Contributions to an employee benefit p U.S.C. §507 (a)(5).
Nature of property or right of setoff: ☐ Real Estate ☐ Motor Vehicle ☐ Other Describe:	Up to \$2,425* of deposits toward purcl lease, or rental of property or services t personal, family, or household use - 11
Value of Property: \$ Annual Interest Rate%	§507 (a)(7).
Amount of arrearage and other charges as of time case filed included in secured claim,	☐ Taxes or penalties owed to government - 11 U.S.C. §507 (a)(8).
if any: \$Basis for perfection:	Other - Specify applicable paragraph o
Amount of Secured Claim: \$ Amount Unsecured: \$	U.S.C. §507 (a)().
6. Credits: The amount of all payments on this claim has been credited for the purpose of making this proof of claim.	Amount entitled to priority:
7. Documents: Attach redacted copies of any documents that support the claim, such as promissory notes, purchase	\$
orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. You may also attach a summary. Attach redacted copies of documents providing evidence of perfection of a security interest. You may also attach a summary. (See instruction 7 and definition of "redacted" on reverse side.)	•
DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.	*Amounts are subject to adjustment on 4. and every 3 years thereafter with respect cases commenced on or after the date of
If the documents are not available, please explain:	adjustment.
	creditor or other FOR COURT USE ON

Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.

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B10 (Official Form 10) (12/08)		
UNITED STATES BANKRUPTCY COURT Northern District of California		PROOF OF CLAIM
Name of Debtor-	Case Number:	-10_10g000
Lehman Bothows	A CC	13000
NOTE: This form should not be used to make a claim for an administrative expense arising after the commence	ement of the case.	A request for payment of an
administrative expense may be filed pursuant to 11 U.S.C. § 503.  Name of Creditor (the person or other entity to whom the debtor owes money or property):		ox to indicate that this claim
PG&E Acct	amends a pre	eviously filed claim.
Name and address where notices should be sent: PG&E Acct	Court Claim N	Number:
1900 Harrison St Oakland, Ca 94612	(If known)	,
Vastand, Ca 74012		
Telephone number:		
Name and address where payment should be sent (if different from above):  When he was the control of the contro	else has filed	ox if you are aware that anyone a proof of claim relating to your a copy of statement giving
Telephone number:	Check this be in this case.	ox if you are the debtor or trustee
1. Amount of Claim as of Date Case Filed: \$	5. Amount of C	Claim Entitled to Priority under
If all or part of your claim is secured, complete item 4 below; however, if all of your claim is unsecured, do not complete item 4.	ciaim falls in	07(a). If any portion of your one of the following categories x and state the amount.
If all or part of your claim is entitled to priority, complete item 5.	Specify the price	ority of the claim.
☐Check this box if claim includes interest or other charges in addition to the principal amount of claim. Attach itemized statement of interest or charges.	☐Domestic sup	oport obligations under 11 a)(1)(A) or (a)(1)(B).
2. Basis for Claim: (See instruction #2 on reverse side.)	<u>laring managan</u>	- · · · · · · · · · · · · · · · · · · ·
3. Last four digits of any number by which creditor identifies debtor:		es, or commissions (up to med within 180 days before
3a. Debtor may have scheduled account as:  (See instruction #3a on reverse side.)		ankruptcy petition or cessation s business, whichever is earlier 507 (a)(4).
4. Secured Claim (See instruction #4 on reverse side.)  Check the appropriate box if your claim is secured by a lien on property or a right of setoff and provide the requested information.	☐Contributions to an employee benefit plan - 1: U.S.C. §507 (a)(5).	
Nature of property or right of setoff:	lease, or renta	of deposits toward purchase, d of property or services for ily, or household use - 11 U.S.C.
Value of Property: \$ Annual Interest Rate%	§507 (a)(7).	271 01 11010110110 1100 - 11 010101
Amount of arrearage and other charges as of time case filed included in secured claim,	Taxes or pena	dities owed to governmental units 507 (a)(8).
if any: \$Basis for perfection:	Other - Specif	fy applicable paragraph of 11
Amount of Secured Claim: \$ Amount Unsecured: \$	U.S.C. §507	
6. Credits: The amount of all payments on this claim has been credited for the purpose of making this proof of claim.	A	ent antitled to natority.
7. Documents: Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. You may also attach a summary. Attach redacted copies of documents providing evidence of perfection of a security interest. You may also attach a summary. (See instruction 7 and definition of "redacted" on reverse side.)	\$	nt entitled to priority:
DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.	and every 3 year	ubject to adjustment on 4/1/10 rs thereafter with respect to ed on or after the date of
If the documents are not available, please explain:	adjustment.	
Date: Signature: The person filing this claim must sign it. Sign and print name and title, if any, of the coperson authorized to file this claim and state address and telephone number if different from the nation. Attach copy of power of attorney, if any ()	reditor or other otice address	FOR COURT USE ONLY
Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or	Est 10 H c C c	\$ 150 and 2571

08-13555-mg Doc 8245-5 Filed 04/07/10 Entered 04/12/10 17:24:44 Attachment 6 Pg 10 of 29

		MC-0	14
	PLAINTIFF: BANK OF NEW YORK AS TRUSTEE FOR THE	CASE NUMBER:	
_	CERTIFICATEHOLDERS CWALT 2005-41	o. lot Hombert	
	DEFENDANT: ROBERT EBERWEIN, CHALEDEEANNKA DEBORAH ANN	BG09483362	
	WILLIAMS GOYENS-BELL EBERWEIN	EG0740550Z	

mu	ist complete this proof of service.)	CHANGE OF ADDRESS ss if you are a party in the action. The person who served the not			
1.	I am at least 18 years old and not a party to this action place, and my residence or business address is (specify	. I am a resident of or employed in the county where the mailing took 1: 1231 East Dyer Road, Suite 100, Santa			
•	Ana, CA 92705	sale and a particular sales and sales			
	I served a copy of the <i>Notice of Change of Address</i> by enclosing it in a sealed envelope with postage fully prepaid and <i>(check one):</i> a deposited the sealed envelope with the United States Postal Service.				
	b. X placed the sealed envelope for collection and p	rocessing for mailing, following this business's usual practices,			
3.	The Notice of Change of Address was mailed: a. on (date): MAR 2 9 2010				
	b. from (city and state): Santa Ana, CA				
4.	The envelope was addressed and mailed as follows:				
i	a.Name of person served: ROBERT EBERWEIN	c. Name of person served:			
	Street address: 3109 King Street, Unit D	Street address:			
	City: Berkeley	City:			
	State and zip code: CA 94703	State and zip code:			
J	b.Name of person served: CHALEDEEANNKA DEBORAH ANN WILLIAMS GOYENS-BELL EBERWEIN	d.Name of person served:			
	Street address: 3109 King Street, Unit D	Street address:			
	City: Berkeley	City:			
	State and zip code: CA 94703	State and zip code:			
	Names and addresses of additional persons served are	attached. (You may use form POS-030(P).)			
l dec	clare under penalty of perjury under the laws of the State of				
Date		outline that the foregoing is title and correct.			

<u>Anna Esbri</u> (TYPE OR PRINT NAME OF DECLARANT)

(SIGNATURE OF DECLARANT)

	-	_		_
M	C.	-IJ	4	u

	FOR COURT USE ONLY
ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):	
Ryan W. Stocking, Esq., Bar No. 257567	ĺ
WIT DO DAILED RERGSTROM & WINIERS	ļ.
1231 East Dyer Road, Suite 100 (09-09897)	
Santa Ana, CA 92705	
TELEPHONE NO.: (714) 481-9100 FAX NO. (Optional): (714) 481-9151	
E-MAIL ADDRESS (Optional):	
ATTORNEY FOR (Name): PLAINTIFF	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF ALAMEDA	
STREET ADDRESS: 2120 MARTIN LUTHER KING, JR. WAY	
MAILING ADDRESS:	,
CITY AND ZIP CODE: BERKELEY, CA 94704	
BRANCH NAME: BERKELEY COURTHOUSE	CASE NUMBER:
PLAINTIFF/PETITIONER: BANK OF NEW YORK AS TRUSTEE FOR THE	BG09483362
CERTIFICATEHOLDERS CWALT 2005-41	JUDICIAL OFFICER:
DEFENDANT/RESPONDENT: ROBERT EBERWEIN, CHALEDEEANNKA	
DEBORAH ANN WILLIAMS GOYENS-BELL EBERWEIN	DEPT.:
NOTICE OF CHANGE OF ADDRESS	
	<u> </u>

	NOTICE OF CHARGE OF ADDITION
1.	Please take notice that, as of (date): 03/15/10
	the following party or
	T the attorney for:
	a. X plaintiff (name): BANK OF NEW YORK et al.
	b. defendant (name):
	c. petitioner (name):
	d. respondent (name):
	e other (describe):
	has changed his or her address for service of notices and documents in the above-captioned action.
	has changed his or her address for service of houses and document 1.
	A list of additional parties represented is provided in Attachment 1.
2.	The new address of (name): MILES, BAUER, BERGSTROM & WINTERS
	is as follows:
	a.Street: 1231 East Dyer Road, Suite 100
	b. City: Santa Ana
	c. Mailing address (if different from above):
	d. State and zip code: CA 92705
	e. Telephone number: (714) 481-9100
	f. Fax number (optional): (714) 481-9151
	g. E-mail address (optional):
;	3. All notices and documents regarding the action should be sent to the above address.
	Date MAR 2.9 2010
	Ryan W. Stocking, Esq. Signature of Party Or ATTORNEY)
	(TYPE OR PRINT NAME)  Page 1  Cal. Rules of Court, rule 2

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		MC-04
	PLAINTIFF: BANK OF NEW YORK AS TRUSTEE FOR THE	CASE NUMBER:
_	CERTIFICATEHOLDERS CWALT 2005-41	
	DEFENDANT: ROBERT EBERWEIN; CHALEDEEANNKA DEBORAH ANN	BG09481718
	WILLIAMS GOYENS-BELL EBERWEIN	2007101710
		· · · · · · · · · · · · · · · · · · ·

# PROOF OF SERVICE BY FIRST-CLASS MAIL NOTICE OF CHANGE OF ADDRESS

(NOTE: You cannot serve the Notice of Change of Address if you are a party in the action. The person who served the notice must complete this proof of service.)

 I am at least 18 years old and not a party to this action. I am a resident of or employed in the county where the mailing took place, and my residence or business address is (specify): 1231 East Dyer Road, Suite 100, Santa Ana, CA 92705

I served a copy of the <i>Notice of Change of Address</i> by enclos prepaid and <i>(check one):</i> a deposited the sealed envelope with the United State	
<ul> <li>b. X placed the sealed envelope for collection and proce with which I am readily familiar. On the same day of deposited in the ordinary course of business with the</li> </ul>	orrespondence is placed for collection and mailing, it is
. The Notice of Change of Address was mailed: a. on (date)MAR 2.9 2010	
b. from (city and state): Santa Ana, CA	
The envelope was addressed and mailed as follows:	
a.Name of person served: ROBERT EBERWEIN	c. Name of person served:
Street address: 3109 King Street, Unit A	Street address:
City: Berkeley	City:
State and zip code: CA 94703	State and zip code:
b.Name of person served: CHALEDEEANNKA DEBORAH ANN WILLIAMS GOYENS-BELL EBERWEIN	d.Name of person served:
Street address: 3109 King Street, Unit A	Street address:
City: Berkeley	City:
State and zip code: CA 94703	State and zip code:
Names and addresses of additional names	1.1.4
Names and addresses of additional persons served are attac	cned. (You may use form POS-030(P).)
fectare under penalty of perjury under the laws of the State of Ca	alifornia that the foregoing is true and correct.
ate: MAR 2 9 2016	5 5 3 5555
ate.	
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nna Esbri	I (len (Ihr)
(TYPE OR PRINT NAME OF DECLARANT)	(SIGNATURE OF DECLARANT)

MC-040

	1410-040
ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):  Ryan W. Stocking, Esq., Bar No. 257567  MILES, BAUER, BERGSTROM & WINTERS  1231 East Dyer Road, Suite 100 (09-09617)	FOR COURT USE ONLY
Santa Ana, CA 92705  TELEPHONE NO.: (714) 481-9100 FAX NO. (Optional): (714) 481-9151  E-MAIL ADDRESS (Optional):	•
ATTORNEY FOR (Name): PLAINTIFF	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF ALAMEDA  STREET ADDRESS: 2120 MARTIN LUTHER KING, JR. WAY  MAILING ADDRESS:	
CITY AND ZIP CODE: BERKELEY, CA 94704	
BRANCH NAME: BERKELEY COURTHOUSE  PLAINTIFF/PETITIONER: BANK OF NEW YORK AS TRUSTEE FOR THE	CASE NUMBER:
CERTIFICATEHOLDERS CWALT 2005-41	BG09481718
DEFENDANT/RESPONDENT: ROBERT EBERWEIN; CHALEDEEANNKA	JUDICIAL OFFICER:
DEBORAH ANN WILLIAMS GOYENS-BELL EBERWEIN	DEPT.:
NOTICE OF CHANGE OF ADDRESS	
<ol> <li>Please take notice that, as of (date): 03/15/10         <ul> <li>the following party or</li> <li>the attorney for:</li> <li>a. X plaintiff (name): BANK OF NEW YORK et al.</li> <li>defendant (name):</li> <li>petitioner (name):</li> </ul> </li> </ol>	
d. respondent (name):	
e other (describe):	
C. Carol (dodolibo).	
has changed his or her address for service of notices and documents in the above-	captioned action.
A list of additional parties represented is provided in Attachment 1.	
2. The new address of (name): MILES, BAUER, BERGSTROM & WINTERS	
is as follows:	
a.Street: 1231 East Dyer Road, Suite 100	
b. City: Santa Ana	
c. Mailing address (if different from above):	
d. State and zip code: CA 92705	
e. Telephone number: (714) 481-9100	
f. Fax number (optional): (714) 481-9151	
g. E-mail address (optional):	
3. All notices and documents regarding the action should be sent to the above address Date: MAR 2.9 2010	
Ryan W. Stocking, Esq.	Tank same to the same to
(TYPE OR PRINT NAME)	ATURE OF PARTY OR ATTORNEY) Page 1 of 2

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		MC-040
	PLAINTIFF: BANK OF NEW YORK AS TRUSTEE FOR THE	CASE NUMBER:
_	CERTIFICATEHOLDERS CWALT 2005-41	
	DEFENDANT: ROBERT EBERWEIN; CHALEDEEANNKA DEBORAH ANN	BG09481718
	WILLIAMS GOYENS-BELL EBERWEIN	

# PROOF OF SERVICE BY FIRST-CLASS MAIL **NOTICE OF CHANGE OF ADDRESS**

(NOTE: You cannot serve the Notice of Change of Address if you are a party in the action. The person who served the notice

1.	l am a	t leas	t 18 years old	and not a pa	rty to this action.	lamar	esident (	of or em	ployed in	the county	where t	the mailing	took
	place,	and r	my residence	or business ac	ddress is (specify).	: 1231	East	Dyer	Road,	Suite	100,	Santa	
	Ana,	CA	92705										

m	ist complete this proof of service.)	rou are a party in the action. The pers	on who served the notice
	I am at least 18 years old and not a party to this action. I place, and my residence or business address is (specify): Ana, CA 92705		
2.	I served a copy of the <i>Notice of Change of Address</i> by encl prepaid and <i>(check one)</i> :  a deposited the sealed envelope with the United St	-	fully
	b. X placed the sealed envelope with the officed St. with which I am readily familiar. On the same day deposited in the ordinary course of business with	ssing for mailing, following this business' orrespondence is placed for collection ar	
3.	The <i>Notice of Change of Address</i> was mailed: a. on <i>(date)</i> MAR 2 9 2016		
	b. from (city and state): Santa Ana, CA		
4.	The envelope was addressed and mailed as follows:		
	a.Name of person served: ROBERT EBERWEIN	c. Name of person served:	
	Street address: 3109 King Street, Unit A	Street address:	
	City: Berkeley	City:	
	State and zip code: CA 94703	State and zip code:	
	b.Name of person served: CHALEDEEANNKA DEBORAH ANN WILLIAMS GOYENS-BELL EBERWEIN	d.Name of person served:	
	Street address: 3109 King Street, Unit A	Street address:	
	City: Berkeley	City:	
	State and zip code: CA 94703	State and zip code:	
	Names and addresses of additional persons served are a	ched. (You may use form POS-030(P).)	
l d	eclare under penalty of perjury under the laws of the State of	alifornia that the foregoing is true and co	rect.
Da	te: MAR 2 9 2010		
	·		
<u>Ar</u>	na Esbri	) Ma C	SUCU
	(TYPE OR PRINT NAME OF DECLARANT)	(SIGNATURE OF DE	CLARANT)

			150	
М	<b>C</b> .	_	n	41

	1410-040
ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):	FOR COURT USE ONLY
Ryan W. Stocking, Esq., Bar No. 257567	1900
_MILES, BAUER, BERGSTROM & WINTERS	
1231 East Dyer Road, Suite 100 (09-09617)	
Santa Ana, CA 92705	
TELEPHONE NO.: (714) 481-91.00 FAX NO. (Optional): (714) 481-9151	
E-MAIL ADDRESS (Optional):	
ATTORNEY FOR (Name): PLAINTIFF	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF ALAMEDA	
STREET ADDRESS: 2120 MARTIN LUTHER KING, JR. WAY MAILING ADDRESS:	
CITY AND ZIP CODE: BERKELEY, CA 94704	
BRANCH NAME: BERKELEY COURTHOUSE	
PLAINTIFF/PETITIONER: BANK OF NEW YORK AS TRUSTEE FOR THE	CASE NUMBER:
CERTIFICATEHOLDERS CWALT 2005-41	BG09481718
DEFENDANT/RESPONDENT: ROBERT EBERWEIN; CHALEDEEANNKA	JUDICIAL OFFICER:
DEBORAH ANN WILLIAMS GOYENS-BELL EBERWEIN	DEPT.:
NOTICE OF CHANGE OF ADDRESS	
the following party or  X the attorney for:  a. X plaintiff (name): BANK OF NEW YORK et al.  b. defendant (name):  c. petitioner (name):  d. respondent (name):  e. other (describe):  has changed his or her address for service of notices and documents in the abov  A list of additional parties represented is provided in Attachment 1.  The new address of (name): MILES, BAUER, BERGSTROM & WINTER	
is as follows:	
a.Street: 1231 East Dyer Road, Suite 100	
b. City: Santa Ana	
c. Mailing address (if different from above):	
d. State and zip code: CA 92705	
e. Telephone number: (714) 481-9100	
f. Fax number (optional): (714) 481-9151	
g. E-mail address (optional):	
3. All notices and documents regarding the action should be sent to the above addr	ress.
Date: MAR 2 9 2010	
Ryan W. Stocking, Esq.	SIGNATURE OF PARTY OF ATTORNEY
(TYPE OR PRINT NAME)	SIGNATURE OF PARTY OR ATTORNEY) Page 1 of
Form Approved for Optional Use NOTICE OF CHANGE OF ADDRESS	Torol Cal Rules of Court rule 2.20

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_		MC-04
	PLAINTIFF: BANK OF NEW YORK AS TRUSTEE FOR THE	CASE NUMBER:
1	CERTIFICATEHOLDERS CWALT 2005-41	
1	DEFENDANT: ROBERT EBERWEIN, CHALEDEEANNKA DEBORAH ANN	BG09483364
	WILLIAMS GOYENS-BELL EBERWEIN	

	NOTICE OF CH	BY FIRST-CLASS MAIL ANGE OF ADDRESS you are a party in the action. The person who served the noti				
	<ol> <li>I am at least 18 years old and not a party to this action. I am a resident of or employed in the county where the mailing place, and my residence or business address is (specify): 1231 East Dyer Road, Suite 100, Santa Ana, CA 92705</li> </ol>					
2.	I served a copy of the Notice of Change of Address by enclo prepaid and (check one):  a deposited the sealed envelope with the United States					
		essing for mailing, following this business's usual practices, correspondence is placed for collection and mailing, it is no little of the United States Postal Service.				
3.	The Notice of Change of Address was mailed:  a. on (date): MAR 29 MM  b. from (city and state): Santa Ana, CA					
4.	The envelope was addressed and mailed as follows:					
	a.Name of person served: ROBERT EBERWEIN	c. Name of person served:				
	Street address: 3109 King Street, Unit B	Street address:				
	City: Berkeley	City:				
	State and zip code: CA 94703	State and zip code:				
	b.Name of person served: CHALEDEEANNKA DEBORAH ANN WILLIAMS GOYENS-BELL EBERWEIN	d.Name of person served:				
	Street address: 3109 King Street, Unit B	Street address:				
	City: Berkeley	City:				
	State and zip code: CA 94703	State and zip code:				
	Names and addresses of additional persons served are att	ached. (You may use form POS-030(P).)				
10	declare under penalty of perjury under the laws of the State of 0	California that the foregoing is true and correct.				
D	ate: MAR 2 9 2010					

Clua Anna Esbri

(TYPE OR PRINT NAME OF DECLARANT)

	MC-040
ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):	FOR COURT USE ONLY
Ryan W. Stocking, Esq., Bar No. 257567 MILES, BAUER, BERGSTROM & WINTERS	
1231 East Dyer Road, Suite 100 (09-09877)	
Santa Ana, CA 92705	
TELEPHONE NO.: (714) 481-9100 FAX NO. (Optional): (714) 481-9151  E-MAIL ADDRESS (Optional):	
ATTORNEY FOR (Name): PLAINTIFF	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF ALAMEDA	
STREET ADDRESS: 2120 MARTIN LUTHER KING, JR. WAY	
MAILING ADDRESS:	
CITY AND ZIP CODE: BERKELEY, CA 94704  BRANCH NAME: BERKELEY COURTHOUSE	
PLAINTIFF/PETITIONER: BANK OF NEW YORK AS TRUSTEE FOR THE	CASE NUMBER:
CERTIFICATEHOLDERS CWALT 2005-41	BG09483364
DEFENDANT/RESPONDENT: ROBERT EBERWEIN, CHALEDEEANNKA	JUDICIAL OFFICER:
DEBORAH ANN WILLIAMS GOYENS-BELL EBERWEIN	DEPT.:
NOTICE OF CHANGE OF ADDRESS	
1. Please take notice that, as of (date): 03/15/10	
the following party or	
X the attorney for:	
a. X plaintiff (name): BANK OF NEW YORK et al.	
b. defendant (name):	
c. petitioner (name):	
d. respondent (name):	
e. other (describe):	
·	
has changed his or her address for service of notices and documents in the above-of	captioned action.
A list of additional parties represented is provided in Attachment 1.	
2. The new address of (name): MILES, BAUER, BERGSTROM & WINTERS	
, , , , , , , , , , , , , , , , , , , ,	
is as follows:	
a.Street: 1231 East Dyer Road, Suite 100	
b. City: Santa Ana	
c. Mailing address (if different from above);	
d. State and zip code: CA 92705	
e. Telephone number: (714) 481-9100	
f. Fax number (optional): (714) 481~9151	
g. E-mail address (optional):	
3. All notices and documents regarding the action should be sent to the above address	s/
Date:MAR 2 9 2010	
Ryan W. Stocking, Esq.	
(TYPE OR PRINT NAME)	ATURE OR PARTY OR ATTORNEY) Page 1 of 2

08-13555-mg Doc 8245-5 Filed 04/07/10 Entered 04/12/10 17:24:44 Attachment 6 Pg 18 of 29

		IVIC-04
	PLAINTIFF: BANK OF NEW YORK AS TRUSTEE FOR THE	CASE NUMBER:
_	CERTIFICATEHOLDERS CWALT 2005-41	
	DEFENDANT: ROBERT EBERWEIN, CHALEDEEANNKA DEBORAH ANN	BG09483362
	WILLIAMS GOYENS-BELL EBERWEIN	2003403302

# PROOF OF SERVICE BY FIRST-CLASS MAIL **NOTICE OF CHANGE OF ADDRESS**

(NOTE: You cannot serve the Notice of Change of Address if you are a party in the action. The person who served the notice

must complete this proof of service.)	•			
<ol> <li>I am at least 18 years old and not a party to this action. I place, and my residence or business address is (specify): Ana, CA 92705</li> </ol>	am a resident of or employed in the county where the mailing took 1231 East Dyer Road, Suite 100, Santa			
I served a copy of the <i>Notice of Change of Address</i> by enclosing it in a sealed envelope with postage fully prepaid and <i>(check one):</i> a deposited the sealed envelope with the United States Postal Service.				
b. X placed the sealed envelope for collection and pro- with which I am readily familiar. On the same day deposited in the ordinary course of business with	cessing for mailing, following this business's usual practices, correspondence is placed for collection and mailing, it is the United States Postal Service.			
3. The Notice of Change of Address was mailed: a. on (date): MAR 2 9 2010				
b. from (city and state): Santa Ana, CA				
4. The envelope was addressed and mailed as follows:	·			
a.Name of person served: ROBERT EBERWEIN	c. Name of person served:			
Street address: 3109 King Street, Unit D	Street address:			
City: Berkeley	City:			
State and zip code: CA 94703	State and zip code:			
b.Name of person served: CHALEDEEANNKA DEBORAH ANN WILLIAMS GOYENS-BELL EBERWEIN	d.Name of person served:			
Street address: 3109 King Street, Unit D	Street address:			
City: Berkeley	City:			
State and zip code: CA 94703	State and zip code:			
Names and addresses of additional persons served are at	tached. (You may use form POS-030(P).)			
I declare under penalty of perjury under the laws of the State of				
	Camorna that the foregoing is true and correct.			
Date: MAR 2 9 2010				
Anna Esbri	· Clua Esbri			
(TYPE OR PRINT NAME OF DECLARANT)	(SIGNATURE OF DECLARANT)			

MC-040 [Rev. January 1, 2007]

	MC-040
ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):	FOR COURT USE ONLY
Ryan W. Stocking, Esq., Bar No. 257567	
MILES, BAUER, BERGSTROM & WINTERS 1231 East Dyer Road, Suite 100 (09-09897)	
1231 East Dyel Road, Suite 100 (05 0101)	
Santa Ana, CA 92705	
TELEPHONE NO.: (714) 481-9100 FAX NO. (Optional): (714) 481-9151	
E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name): PLAINTIFF	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF ALAMEDA	]
STREET ADDRESS: 2120 MARTIN LUTHER KING, JR. WAY	
MAILING ADDRESS: CITY AND ZIP CODE: BERKELEY, CA 94704	
BRANCH NAME: BERKELEY COURTHOUSE	
PLAINTIFF/PETITIONER: BANK OF NEW YORK AS TRUSTEE FOR THE	CASE NUMBER:
CERTIFICATEHOLDERS CWALT 2005-41 DEFENDANT/RESPONDENT: ROBERT EBERWEIN, CHALEDEEANNKA	BG09483362 JUDICIAL OFFICER:
DEBORAH ANN WILLIAMS GOYENS-BELL EBERWEIN	
NOTICE OF CHANGE OF ADDRESS	DEPT.:
1. Please take notice that, as of (date): 03/15/10	
1. Please take notice that, as of (date). 03/13/10	
- DANK OF NEW YORK AT A	
A Control to a series of the s	
c. petitioner (name):	
d. respondent (name):	
e other (describe):	
has changed his or her address for service of notices and documents in the above	e-captioned action.
A list of additional parties represented is provided in Attachment 1.	•
2. The new address of (name): MILES, BAUER, BERGSTROM & WINTERS	S
2. The new address of (name). MILLED, BACKY BENCHMAN	
is as follows:	
a.Street: 1231 East Dyer Road, Suite 100	
b. City: Santa Ana	
16 I'm address (if different from about)	
0 to and in and 02705	
e. Telephone number: (714) 481-9100	
f. Fax number (optional): (714) 481-9151	
g. E-mail address (optional):	
3. All notices and documents regarding the action should be sent to the above addr	E35.
DateMAR 2.9 2010 ( \ \	$\rightarrow$
Ryan W. Stocking, Esq.	
Ryan W. Stocking, Esq. (Type or Print NAME)	GNATURE OF PARTY OR ATTORNEY)

08-13555-mg Doc 8245-5 Filed 04/07/10 Entered 04/12/10 17:24:44 Attachment 6 Pg 20 of 29

		IVIC-040
	PLAINTIFF: BANK OF NEW YORK AS TRUSTEE FOR THE	CASE NUMBER:
-	CERTIFICATEHOLDERS CWALT 2005-41	
	DEFENDANT: ROBERT EBERWEIN, CHALEDEEANNKA DEBORAH ANN	BG09483364
	WILLIAMS GOYENS-BELL EBERWEIN	

# PROOF OF SERVICE BY FIRST-CLASS MAIL NOTICE OF CHANGE OF ADDRESS

(NOTE: You cannot serve the Notice of Change of Address if you are a party in the action. The person who served the notice must complete this proof of service.)

1. I am at least 18 years old and not a party to this action. I am a resident of or employed in the county where the mailing took place, and my residence or business address is (specify): 1231 East Dyer Road, Suite 100, Santa Ana, CA 92705

2.	I served a copy of the <i>Notice of Change of Address</i> by enclosing it in a sealed envelope with postage fully prepaid and <i>(check one):</i> a deposited the sealed envelope with the United States Postal Service.				
	b. X placed the sealed envelope for collection and processing for mailing, following this business's usual practices, with which I am readily familiar. On the same day correspondence is placed for collection and mailing, it is deposited in the ordinary course of business with the United States Postal Service.				
3.	The Notice of Change of Address was mailed:  a. on (date): MAR 29 MM  b. from (city and state): Santa Ana, CA				
4.	The envelope was addressed and mailed as follows:				
	a.Name of person served: ROBERT EBERWEIN	c. Name of person served:			
	Street address: 3109 King Street, Unit B	Street address:			
	City: Berkeley	City:			
	State and zip code: CA 94703	State and zip code:			
	b.Name of person served: CHALEDEEANNKA DEBORAH ANN WILLIAMS GOYENS-BELL EBERWEIN	d.Name of person served:			
	Street address: 3109 King Street, Unit B	Street address:			
	City: Berkeley	City:			
	State and zip code: CA 94703	State and zip code:			
	Names and addresses of additional persons served are atta	ached. (You may use form POS-030(P).)			
۱d	ectare under penalty of perjury under the laws of the State of C	California that the foregoing is true and correct.			
Da	nte: WAR 2 9 2010				
Δr	nna Esbri	· aux Espei			
	(TYPE OR PRINT NAME OF DECLARANT)	(SIGNATURE OF DECLARANT)			

ATTORNEY OR PARTY WATHOUT ATTORNEY (1)		MC-04
ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):  Ryan W. Stocking, Esq., Bar No. 257567  MILES, BAUER, BERGSTROM & WINTERS  1231 East Dyer Road, Suite 100 (09-09877)	FOR COURT USE ONLY	•
Santa Ana, CA 92705  TELEPHONE NO.: (714) 481-9100 FAX NO. (Optional): (714) 481-91  E-MAIL ADDRESS (Optional):  ATTORNEY FOR (Name): PLAINTIFF	.51	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF ALAMEDA STREET ADDRESS: 2120 MARTIN LUTHER KING, JR. WAY MAILING ADDRESS: CITY AND ZIP CODE: BERKELEY, CA 94704		
BRANCH NAME: BERKELEY COURTHOUSE  PLAINTIFF/PETITIONER: BANK OF NEW YORK AS TRUSTEE FOR CERTIFICATEHOLDERS CWALT 2005-41  DEFENDANT/RESPONDENT: ROBERT EBERWEIN, CHALEDEEANNKA DEBORAH ANN WILLIAMS GOYENS-BELL EBERWEIN	THE CASE NUMBER: BG09483364 JUDICIAL OFFICER:	
NOTICE OF CHANGE OF ADDRESS	DEPT.:	
X the attorney for:  a. X plaintiff (name): BANK OF NEW YORK et al.  b. defendant (name):  c. petitioner (name):  d. respondent (name):  e. other (describe):  has changed his or her address for service of notices and documents in the  A list of additional parties represented is provided in Attachment 1.  The new address of (name): MILES, BAUER, BERGSTROM & WIN		
is as follows:  a.Street: 1231 East Dyer Road, Suite 100  b. City: Santa Ana  c. Mailing address (if different from above):	·	
<ul> <li>d. State and zip code: CA 92705</li> <li>e. Telephone number: (714) 481-9100</li> <li>f. Fax number (optional): (714) 481-9151</li> <li>g. E-mail address (optional):</li> </ul>		
3. All notices and documents regarding the action should be sent to the above a Date. MAR 2.9 2010  Ryan W. Stocking, Esq.	address	
(TYPE OR PRINT NAME)	(SIGNATURE OF PARTY OR ATTORNEY)	<del></del>
m Approved for Optional Use	Pag	ge 1 of 2

Form Approved for Optional Use Judicial Council of California MC-040 [Rev. January 1, 2007]

NOTICE OF CHANGE OF ADDRESS

Solutions Q Plus Cal. Rules of Court, rule 2.200

MAR 26 2010

BANKRUPTCY COURT NORTHERN DISTRICT OF CALIFORNIA

OAKLAND DIVISION

UNITED STATES

RT NORTHERN DISTRICT OF CALIFORNIA

10-40860-EDJ13/7

Debtor.: PROPERTY ASSET MANAGEMENT

Judge..: EDWARD JELLEN

Amount::

10-04076

ADVERSARY

16:52:55

March 26.

# 40070275

FROM: LISA MORRIS

Total->

REQUESS FLOX THE WALLER Brienske,

Support Ex Parte Motion nun pro tunc entry missing proofs Of claims filed February 2nd 2010 APEN 004-0015-015 Declaration of [...

I Lisa Swain-Morris swear under penalty of perjury that I personally and not any other female that

Wrong. I personally appeared at the counter with these proofs of claims. Executed in Oakland California Could have been on court lists of non-filers whom I am in business with did not file or bring in which is

under the laws of the United States under penalty of perjury.

3ANKTUPTOY COURT AKLAND, CALIFORNIA

BANKFUPTOY COURT AKLAND, CALIFORNIA MAR 26 2010 UNITED STATES

BANKRUPTCY COURT NORTHERN DISTRICT OF CALIFORNIA DAKLAND DIVISION

E # 40070275

16:52:55 March 26.

10-04076 ADVERSARY

Debtor.: PROPERTY ASSET MANAGEMENT Judge..: EDWARD JELLEN

Amount.:

Total->

FROM: LISA NORRIS

REGUESS Flex TO WHILEM Moricalsace

Support Ex Parte Motion nun pro tunc entry missing proofs Of claims filed February 2nd 2010 as Trustor in APEN 004-0015-015 Declaration of Z.

I Lisa Swain-Morris swear under penalty of perjury that I personally and not any other female that

Could have been on court lists of non-filers whom I am in business with did not file or bring in which is

Wrong. I personally appeared at the counter with these proofs of claims. Executed in Oakland California

under the laws of the United States under penalty of perjury.

RT NORTHERN DISTRICT OF CALIFORNIA

10-40860-EDJ13/7

MAR 26 2010

BANKRUPTCY COURT NORTHERN DISTRICT OF CALIFORNIA

DAKLAND DIVISION

UNITED STATES

SANKRUPTCY COURT AKLAND, CALIFORNIA

S B

}

40070275

#

2

March 26. 16:52:55

RT NORTHERN DISTRICT OF CALIFORNIA

10-40860-EDJ13/7

Debtor.: PROPERTY ASSET MANAGEMENT

Judge..: EDWARD JELLEN

Amount.

10-04076

ADVERSARY

STOR

FROM: LISA MORRIS

\$0.00

Total->

25 GUESS FLOX TO WALLER Moughster

Support Ex Parte Motion nun pro tunc entry missing proofs Of claims filed February 2nd 2010 . . . . as Trustor in APEN 004-0015-015 Declaration of L.

I Lisa Swain-Morris swear under penalty of perjury that I personally and not any other female that Wrong. I personally appeared at the counter with these proofs of claims. Executed in Oakland California Could have been on court lists of non-filers whom I am in business with did not file or bring in which is

under the laws of the United States under penalty of perjury.

Attachment 6

MAR 26 2010

3ANICAUPTOY COURT AIRLAIND, CALIFORNIA

H.

# 40070275

March 26. 16:52:55

BANKRUPTCY COURT NORTHERN DISTRICT OF CALIFORNIA

DAKLAND DIVISION

UNITED STATES

RT NORTHERN DISTRICT OF CALIFORNIA

10-40860-EDJ13/7

Debtor.: PROPERTY ASSET MANAGEMENT

Judge..: EDWARD JELLEN

Amount.:

10-04076

ADVERSARY

STOR

FROM: LISA MORRIS

\$0.00

Total->

2594559 Flow THE WALLEN

as Trustor in Declaration of L.

Support Ex Parte Motion nun pro tunc entry missing proofs Of claims filed February 2nd 2010

APEN 004-0015-015

I Lisa Swain-Morris swear under penalty of perjury that I personally and not any other female that

Could have been on court lists of non-filers whom I am in business with did not file or bring in which is

Wrong. I personally appeared at the counter with these proofs of claims. Executed in Oakland California

under the laws of the United States under penalty of perjury.

B 10 (Official Form 10) (04/10)	24:44 Attachment 6
UNITED STATES BANKRUPTCY COURT Pg 26 of 29 UNITED STATES BANKRUPTCY COURT	PROOF OF CLAIM
Name of Debtor THMAN BOLLING HARdy	Case Mantier 13 CYE
NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement administrative expense may be filed pursuant to 11 U.S.C. § 503.	of the case. A request for payment of an
Name of Creditor (the person or other entity to whom the debtor owes money or property):  WELLS FARGO BANK, NA	Check this box to indicate that this claim amends a previously filed
Name and address where notices should be sent:  MICHAEL J ILNICKI	claim,
855 DONALD. ST. SONOMA, CA 95476	Court Claim Number:
Telephone number: 415 902 3698	Filed on:
Name and address where payment should be sent (if different from above):  SAME  Control  Cont	Check this box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.
Telephone number: SAME	<ul> <li>Check this box if you are the debtor or trustee in this case.</li> </ul>
1. Amount of Claim as of Date Case Filed: \$	5. Amount of Claim Entitled to Priority under 11 U.S.C. §507(a). If
If all or part of your claim is secured, complete item 4 below; however, if all of your claim is unsecured, do not complete item 4.	any portion of your claim falls in one of the following categories, check the box and state the
If all or part of your claim is entitled to priority, complete item 5.	amount.
☐ Check this box if claim includes interest or other charges in addition to the principal amount of claim. Attach itemized statement of interest or charges.	Specify the priority of the claim.
2. Basis for Claim: MORTGAGE NOTE (See instruction #2 on reverse side.)	☐ Domestic support obligations under 11 U.S.C. §507(a)(1)(A) or (a)(1)(B).
3. Last four digits of any number by which creditor identifies debtor 5752	☐ Wages, salaries, or commissions (up to \$11,725*) earned within 180 days
3a. Debtor may have scheduled account as:  (See instruction #3a on reverse side.)	before filing of the bankruptcy petition or cessation of the debtor's
4. Secured Claim (See instruction #4 on reverse side.)  Check the appropriate box if your claim is secured by a lien on property or a right of setoff and provide the requested	business, whichever is earlier – 11 U.S.C. §507 (a)(4).
information.	Contributions to an employee benefit
Nature of property or right of setoff: Real Estate	plan – 11 U.S.C. §507 (a)(5).
Value of Property:\$ Annual Interest Rate%	Up to \$2,600* of deposits toward purchase, lease, or rental of property
Amount of arrearage and other charges as of time case filed included in secured claim,	or services for personal, family, or household use – 11 U.S.C. §507 (a)(7).
if any: \$Basis for perfection:	☐ Taxes or penalties owed to
Amount of Secured Claim: \$ Amount Unsecured: \$	governmental units – 11 U.S.C. §507 (a)(8).
6. Credits: The amount of all payments on this claim has been credited for the purpose of making this proof of claim.	☐ Other – Specify applicable paragraph
7. Documents: Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements.	of 11 U.S.C. §507 (a)().
You may also attach a summary. Attach redacted copies of documents providing evidence of perfection of a security interest. You may also attach a summary. (See instruction 7 and definition of "redacted" on reverse side.)	Amount entitled to priority:
DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.	\$*  *Amounts are subject to adjustment on
If the documents are not available, please explain:	4/1/13 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.
Date: 5.5.10 Signature: The person filing this claim must sign, it. Sign and print name and title, if any, of the cre other person authorized to file this claim and state address and telephone number if different from the address at the serve. Attach espy of power of attorney if any.	FOR COURT USE ONLY
Khalal Skiller	

_	Recording Requested By:
36	FIRST AMERICAN LOANSTAF
,	

When Recorded Mail To: FIRST AMERICAN LOANSTAR TRUSTEE **SERVICES** P.O. BOX 961253 FT WORTH, TX 76161-0253

RTRUSTEE SERVICES

APN:

127-093-059-000

TS No.: 20099070810854



GENERAL PUBLIC 06/30/2009 11:20 ASGTTD

RECORDING FEE: 8.00

# 2009064258

OFFICIAL RECORDS OF SONOMA COUNTY JANICE ATKINSON

> PG 1



Space above this line for Recorder's use only

Title Order No.: 4135739

#### ASSIGNMENT OF DEED OF TRUST

For Value Received, the undersigned corporation hereby grants, assigns, and transfers to:

HSBC Bank USA, National Association as Trustee for Wells Fargo Asset Securities Corporation, Mortgage Asset-Backed Pass-Through Certificates Series 2007-AR8

all beneficial interest under that certain Deed of Trust dated: 7/31/2007 executed by

#### MICHAEL J ILNICKI

Trustor(s), to FIDELITY NATIONAL TITLE INSURANCE COMPANY, as Trustee, and recorded on 8/14/2007 as Instrument No. 2007090158, in Book, Page in the office of the County Recorder of SONOMA County, CALIFORNIA together with the Promissory Note secured by said Deed of Trust and also all rights accrued or to accrue under said Deed of Trust.

Dated:	JUN Z G <b>2009</b>	WELLS FARGO BANK, N.A. BY FIRST
	<del></del>	AMERICAN LOANSTAR TRUSTEE SERVICES,
		LLC, ITS ATTORNEY IN FACT, AS
		BENEFICIARY
		- CAN
		By: Chet Sconyers, Certifying Officer
State of	TEXAS	
County of	TADDAND	
county of	TARRANT	notary public
	77 D. O.V.	
Before me	Kent R. O'C	, on this day personally appeared,
Chet Scony	ers	known to me to be the person whose name is
	to the foregoing instrument s and consideration therein	and acknowledged to me that this person executed the same for
Given under	r my hand and seal of office	this day of, A.D.
,		
1/4	201	(Notary Seal) .
		(110101) (110101)

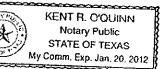


Exhibit C

Requested and Prepared by:

When Recorded Mail To:

FIRST AMERICAN LOANSTAR TRUSTEE SERVICES P.O. BOX 961253

FT. WORTH, TX 76161-0253



GENERAL PUBLIC 06/19/2009 11:13 SBST RECORDING FEE: 11.00

PAID

2009060333

OFFICIAL RECORDS OF SONOMA COUNTY JANICE ATKINSON

PGS



CALSA

Space above this line for Recorder's use only

TS No.:

20099070810854

TSG No.:

4135739

WHEREAS,

Loan No.: \*\*\*\*\*5752/ILNICKI

California

MICHAEL J ILNICKI

was the original Trustor, FIDELITY NATIONAL TITLE INSURANCE COMPANY was the original Trustee, and WELLS FARGO BANK, N.A. was the original Beneficiary under that certain Deed of Trust Dated 7/31/2007 and recorded on 08/14/2007 as Instrument No. 2007090158, in Parcel No. 127-093-059-000 of Official Records of SONOMA County, California; and

SUBSTITUTION OF TRUSTEE

WHEREAS, the undersigned is the present Beneficiary under said Deed of Trust, and

WHEREAS, the undersigned desires to substitute a new Trustee under said Deed of Trust in place and instead of said original Trustee, or Successor Trustee, thereunder, in the manner in said Deed of Trust provided,

NOW, THEREFORE, the undersigned hereby substitute, FIRST AMERICAN LOANSTAR TRUSTEE SERVICES WHOSE ADDRESS IS: P.O. BOX 961253, FT. WORTH, TX 76161-0253 as Trustee under said Deed of Trust.

Whenever the context hereof so requires, the masculine gender includes the feminine and/or neuter, and the singular number includes the plural.

# 7

# SUBSTITUTION OF TRUSTEE - PAGE 2

TS No.: 20099070810854

TSG No.: 4135739

Loan No.: \*\*\*\*\*5752/ILNICKI

California

<b>WELLS FARGO BANK</b>	. N.A.
-------------------------	--------

by First American LoanStar Trustee Services, LLC as attorney in fact

Date:	6/16/2009	•			
	***************************************		CHETSO	ONYERS, Certifyin	q Officer
State of	TEXAS	) §			
County of	TARRANT	)			
known to me same for the	purposes and considera	se name is subscrib ution therein express	is day personally appeared CHI code to the foregoing instrument seed.	and acknowledged to me that	FIFYING OFFICER this person executed the
WITNESS 11	ny hand and official sea	d,		Note	ry Public OF TEXAS
Signature K	LHICOG ENT R. O'QUIN	N	(Seal)	My Comm. 6	xp. Jan. 20, 2012